

N1Z0000005985

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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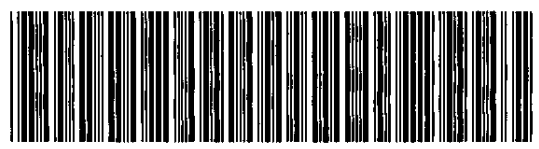
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
12 SEP 17 PM 3:21

OD/RES  
9.17.12

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** CONGREGATION BEIT SHEEKOOM INC  
(Name of Corporation)

**DOCUMENT NUMBER:** N12000005985

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DIANA DAVIS

(Name of Person)

N/A

(Name of Firm/Company)

123 RONA LANE

(Address)

DAVENPORT, FL 33897

(City/State and Zip Code)

For further information concerning this matter, please call:

DIANA DAVIS

(Name of Person)

at ( 863 )

424-1798

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

**Street Address:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**Mailing Address:**

Amendment Section  
Division of Corporations  
Post Office Box 6327  
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, DIANA DAVIS, hereby resign as SECRETARY  
(Title)

of CONGREGATION BEIT SHEEKOOM INC.  
(Name of Corporation)

N12000005985, a corporation organized under the laws of the State of  
(Document Number, if known)

FLORIDA



(Signature of resigning officer/director)

SECRETARY  
19 SEP 17 PM 3:21

**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314